

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of: John Moon, et al

Application No.: 10/661,031 Group No.: 2872

Filed: September 12, 2003 Examiner:

For: DIFFRACTION GRATING-BASED ENCODED MICRO-PARTICLES  
FOR MULTIPLEXED EXPERIMENTS

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

FEE VALUE ACCOUNTABILITY	
DEPOSIT ACCOUNT NO. 230442	
FEE CODE	VAL. FURNISHED 201 \$200.00

**AMENDMENT TRANSMITTAL**

1. Transmitted herewith is an amendment for this application. \*\*

\*\*Also enclosed is a Supplemental Information Disclosure Statement and a copy of each non-patent publications cited therein.

**STATUS**

2. Applicant is

a small entity. A statement:

is attached.

was already filed.

Other than a small entity.

**CERTIFICATE OF MAILING/TRANSMISSION UNDER 37 C.F.R. 51.8(a)**

I hereby certify that this correspondence is, on the date shown below, being:

**MAILING**

deposited with the United States Postal Service with sufficient postage as first-class mail, in an envelope addressed to Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Sale Ref: 00000001 Date: 02/26/05 10661031  
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Signature  
Linda Leopardi  
(type or print name of person certifying)

## FEE DEFICIENCY

NOTE: If there is a fee deficiency and there is no authorization to charge an account, additional fees are necessary to cover the additional time consumed in making up the original deficiency. If the maximum six-month period has expired before the deficiency is noted and corrected, the application is held abandoned. In those instances where authorization to charge is included, processing delays are encountered in returning the papers to the PTO Finance Branch in order to apply these charges prior to action on the cases. Authorization to charge the deposit account for any fee deficiency should be checked. See the Notice of April 7, 1986 (1085 O.G. 31-33).

6.  If any additional extension and/or fee is required, charge Account No. 23-0442.

AND/OR

If any additional fee for claims is required, charge Account No. 23-0442.

  
Signature of Practitioner

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